POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	5-3-01
FORMALITY REVIEW	*(initials)*	JC 886	05-16.01
RESPONSE FORMALITY REVIEW	T2	947	08/23/01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim (Final / Original)	Date										
1	√										
2	√										
3	√										
4	√										
5	√										
6	√										
7	√										
8	√										
9	√										
10	√										
11	√										
12	√										
13	√										
14	√										
15	√										
16	√										
17	√										
18	√										
19	√										
20	√										
21	√										
22	√										
23											
24											
25											
26											
27											
28											
29											
30											
31											
32											
33											
34											
35											
36											
37											
38											
39											
40											
41											
42											
43											
44											
45											
46											
47											
48											
49											
50											

Claims 51–100: (all blank)

Claims 101–150: (all blank)

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Best Available Copy

8/23/01
861